PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL ENTITY	
								RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		BMUN	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/G minus 20=				. ,	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		. /			X40=		OR	X80=	30
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in o					column 2	,	TOTAL		OR	TOTAL	190	
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
					(Column 2) (Column 3)			SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	i	NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RÄTE	ADDI- TIONAL FEE
	Total		Minus i	••		=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	_
	- to a section of the							TOTAL			TOTAL	
,i,								ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)			mn 2) IEST	(Column 3)	1			1		
AMENDMENT B		, REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	•••		=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u>ا</u> ا	÷135=		OR	+270=	
		i i					L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ĺ	RDDII. FEE I			AUDII. FEE	·
		CLAIMS		HIGH	EST		lr	T	ADDI-	1		ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL :		RATE	ADDI- TIONAL FEE
	Total	· /	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		iber Previously Pai					r fou	nd in the app	ropriate box	in col	umn 1.	